FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

SEC Mail Processing Section

300s: 12 NAT

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL				
OMB Number:	3235-0076			
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SEC USE ONLY						
Prefix		Serial				
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Washington, DC Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Series C Preferred Share Financing Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE Type of Filing: [X] New Filing [] Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) Club Holdings, LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 303-901-0737 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Telephone Number (Including Area Code) Executive Offices) Brief Description of Business APR 282008 Luxury destination membership club. Type of Business Organization [] limited partnership, already formed [X] other (please specify): limited liability company, already for the MSON RELITERS] corporation [] business trust [] limited partnership, to be formed Month 1 <u>Year</u> Actual or Estimated Date of Incorporation or Organization: [0|1] [0|4] [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuer.

Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Addoms, Ben	
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021	
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Allsup, Len	
Business or Residence Address (Number and Street, City, State, Zip Code)	
11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Anderson, Charles	
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021	
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Anderson, Scott	
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [X] General and/or Managing Partner	
Full Name (Last name first, if individual) Barnet, Bruce	
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021	
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [X] General and/or Managing Partner	
Full Name (Last name first, if individual) Estler, Pete	
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Fitchey, Carey	
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021	
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Kerchof, Don	
Business or Residence Address (Number and Street, City, State, Zip Code)	_
11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021	
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner	
Full Name (Last name first, if individual) Lubner, Ronnie	
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021	_

A. BASIC IDENTIFICATION DATA (continued)

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuer.

Check Box(es) that Apply: [] Promoter [] Beneficial Owner	[] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) McCarthy, Kevin	
Business or Residence Address (Number and Street, City, State, Zip Co. 11101 W. 120th Avenue, Suite 300, Broomfield, CO. 80021	de)
Check Box(es) that Apply: [] Promoter [] Beneficial Owner	[X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Mesikapp, Kenneth	
Business or Residence Address (Number and Street, City, State, Zip Co. 11101 W. 120th Avenue, Suite 300, Broomfield, CO. 80021	de)
Check Box(es) that Apply: [] Promoter [] Beneficial Owner	[] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Mullins, L. Keith	
Business or Residence Address (Number and Street, City, State, Zip Co. 11101 W. 120th Avenue, Suite 300, Broomfield, CO. 80021	de)
Check Box(es) that Apply: [] Promoter [] Beneficial Owner	[X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Preiser, Alex	
Business or Residence Address (Number and Street, City, State, Zip Co. 11101 W. 120th Avenue, Suite 300, Broomfield, CO. 80021	de)
	[X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Short, Karen	
Business or Residence Address (Number and Street, City, State, Zip Co. 11101 W. 120th Avenue, Suite 300, Broomfield, CO. 80021	de)
	r [X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Sutton, Trent	
Business or Residence Address (Number and Street, City, State, Zip Co. 11101 W. 120th Avenue, Suite 300, Broomfield, CO. 80021	de)
	[] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Wetherell, David S.	
Business or Residence Address (Number and Street, City, State, Zip Co	de)
11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021 Check Box(es) that Apply: [] Promoter [X] Beneficial Owne	r [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)	
Berg & Berg Enterprises, LLC	
Business or Residence Address (Number and Street, City, State, Zip Co. 10050 Bandley Drive, Cupertino, CA 95014	de)
	er [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Greenwoods Capital Partners I, LP	
Business or Residence Address (Number and Street, City, State, Zip Coc 245 Fifth Avenue, 25th Floor, New York, NY 10016	de)
	r [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Kittredge Private Holdings, LP	

	Δ	RASIC	IDENTIFICA	ATION DATA	(continued)
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- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuer.

Business or Residence Address 222 El Brillo Way, Palm Beac	s (Number and Street, City, State, Zip Code) h, FL 33408
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if	indivídual)
Monogram Management, LLC	
Business or Residence Address	s (Number and Street, City, State, Zip Code)
11101 W. 120th Avenue, Suite	300, Broomfield, CO 80021
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if	individual)
Scorpion Capital Partners LP	
Business or Residence Address	s (Number and Street, City, State, Zip Code)
245 Fifth Avenue, 25th Floor,	New York, NY 10016

		,			B. INI	ORMAT	ION ABO	UT OFFI	ERING					
1. Has the is	ssuer sold	, or does the	issuer inte	nd to sell, to	non-accre	lited investo	ors in this of	Tering?						Yes No
					Answer also	in Append	ix, Column	2, if filing t	ander ULOI	Ξ.				
2. What is the	he minim	um investm	ent that will					-						\$ N/A
z, what is u		um mvesmi	one snac min	be accepted	a monnumy					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***************************************	***************************************	Yes No
3. Does the	offering p	ermit joint	ownershi p (of a single u	nit?									
registered	on of purc with the	hasers in co	nnection wi	th sales of s e or states, l	ecurities in	the offering of the brok	g. If a perso er or dealer	n to be liste . If more th	d is an asso	ciated perso	n or agent o	r remuneration of a broker of a broker of associated p	r dealer	
Full Name (L	ast name	first, if indi	vidual)			·								
Business or R	Residence	Address (N	umber and	Street, City,	State, Zip	Code)	·		*					
Name of Ass	ociated B	roker or De	aler											
States in Whi (Check "/	ich Person All States'	Listed Has or check in	Solicited o	r Intends to ates)	Solicit Pur	chasers	•••••				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		[] All States
	(AL) [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	(AR) [KS] [NH] [TN]	(CA) [KY] [NJ] [TX]	(CO) [LA] [NM) [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) [MI] [OH] {WV]	[GA] [MN] [OK] [WI]	[HI] [MS] {OR] [WY]	(ID] [MO] [PA] [PR]	
Full Name (L	• •		• •			11	,			· · · ·		· · ·	. ,	·
Business or R	Residence	Address (N	umber and	Street, City,	State, Zip	Code)				 				
Name of Ass	ociated B	roker or De	aler	· · · · · · · · · · · · · · · · · · ·										
States in Whi	ich Darcon	Listed Use	Solicited o	r Intende to	Solicit Dur	hacare								
(Check "/	All States	or check in	ndividual St	ates)				.,	,,				[] All States
	[AL] (IL) (MT) [RI]	[AK] [IN] [NE] [SC]	[AZ] {IA} [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Name (L	ast name	first, if indi	vidual)											
Business or R	tesidence	Address (N	umber and	Street, City,	State, Zip	Code)								
Name of Asse	ociated Bi	roker or Dea	aler											
States in Whi	ich Person	Licted Hac	Solicited o	r Intende to	Solicit Pur	hacere								
•							***************************************	• • • • • • • • • • • • • • • • • • • •					[] All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	(DE) [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] {OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Offering Price Already Type of Security Sold Debt 500,000,000 210,000,000 Equity [] Common [X] Preferred \$ Convertible Securities (including warrants) \$ Partnership Interests) \$ Other (Specify \$ 500,000,000 \$ 210,000,000 Total Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors 210,000,000 \$ Accredited Investors 0 0 \$ Non-accredited Investors Total (for filings under Rule 504 only) \$ Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of Dollar Amount Sold Type of Offering Security Rule 505 Regulation A **Rule 504** Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees 500 Printing and Engraving Costs [X] Legal Fees [X]91,000 Accounting Fees [X]200,000 **Engineering Fees** Sales Commissions (specify finders' fees separately) [] Other Expenses (identify) Form D Filing Fees [X]2,250 Total 293,750 IXI

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	b. Enter the difference between the aggregate offering price given in response furnished in response to Part C-Question 4.a. This difference is the "adjusted of the control of the contro	se to Part C-Question I and total exp d gross proceeds to the issuer"	enses				<u>\$ 49</u>	<u>9,706,250</u>
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used If the amount for any purpose is not known, furnish an estimate and cher payments listed must equal the adjusted gross proceeds to the issuer set forth	ck the box to the left of the estimat	e. Th	e total c	own. of the			
				Ε	ayments to Officers, Directors & Affiliates		ı	Payments to Others
	Salaries and fees	,,,,,	[]		Annates	[]	\$_	
	Purchase of real estate		[]	s		[]	s _	
	Purchase, rental or leasing and installation of machinery and equipment		[]	\$		[]	\$	
	Construction or leasing of plant buildings and facilities			-			\$ _	
	Acquisition of other businesses (including the value of securities involved in exchange for the assets or securities of another issuer pursuant to		[]	s		[]	s	
	Repayment of indebtedness		[]	s		[]	s _	
	Working capital		[]	\$		[X]	\$ _	499,706,250
	Other (specify):							
			. []	s		[]	\$ _	
	Column Totals		[]	\$	·	[X]	s _	499,706,250
	Total Payments Listed (column totals added)		[X]	\$ 499,700	5,250			
_								
	D. FEDER	AL SIGNATURE						
unc	issuer has duly caused this notice to be signed by the undersigned duly author ertaking by the issuer to furnish to the U.S. Securities and Exchange Commiss -accredited investor pursuant to paragraph (b)(2) of Rule 502.	ized person if this notice is filed und the upon written request of its staff, i	ler Ru the inf	le 505, tl ormatior	ne following si I furnished by	gnature the issue	constit r to an	utes an y
	ner (Print or Type) ub Holdings, LLC			Date April 5	-, 2008			
	, ,	of Signer (Print or Type) eral Counsel and Senior Vice Preside		·				

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

END

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)